

BAPTIST UNIVERSITY OF FLORIDA
PETITION FOR INDEPENDENCY
2024-2025

General Guidelines

In determining your eligibility for Federal and State Financial Aid, your parent's financial resources do not have to be included in determining your need if you meet any one of the following criteria: (1) you are 24 years old, born before January 1, 2001; (2) you are a veteran of the U.S. Armed Forces; (3) you are an orphan or ward of the court; (4) you have legal dependents other than a spouse; (5) you are married; or (6) you are a graduate or professional student.

If you do not fit any of the above criteria and can document that you have no relationship with your "parents" and you have sufficient resources to financially support yourself, then you can proceed with completing this form. Please note that PETITIONS FOR INDEPENDENT STATUS MUST BE UNIQUE and based on unusual extenuating circumstances, NOT SOLEY INDEPENDENT LIVING OUTSIDE OF THE PARENT'S HOME. All petitions MUST be accompanied with proper documentation. Petitions without documentation will be returned to petitioners with no action taken.

Before You Begin

This form should be submitted with either:

- (1) A completed Free Application for Federal Student Aid (FAFSA) Form or,
- (2) A 2024-2025 Student Aid Report (SAR), if you have already completed an application for aid form and have received the results.

Student Status

Name _____ SS# _____ - _____ - _____

Address _____

City _____ State _____ Zip _____

Have you ever been previously classified as an independent student when qualifying for Federal or State Financial Aid?

_____ No _____ Yes If yes, please indicate where and when:

Name of College

Academic Year

Income Information

Please provide a detailed listing of amount and sources of income for 2022. Please note that ALL of these figures must be documented:

Source of Income	Amount
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
Total Income for 2022	\$ _____

Extenuating Circumstances

Please attach a letter explaining your extenuating circumstances. All students must attach a brief narrative explaining their lack of parental support and what their current relationship is with their "parents". You must be specific with dates and locations when referring to events that have transpired. **Two letters must accompany this form verifying your extenuating circumstances.** These letters can be from individuals such as school counselors, members of the clergy, relatives, employers, and adult friends.

Student Certification and Signature

Student Signature	Date
-------------------	------

=====

Financial Aid Office Use Only

_____Approved _____Denied

Financial Aid Director	Date
------------------------	------